186-E

Previous references.

1914-15

(Medical

File No. 186-13

Serial Nos. 1-3

Later references.

med 131-14 (1-3)

GENERAL AND REVENUE SECRETARIAT.

Serial Nos. 1 - 3

Part B. for July 1914

SUBJECT

2 years of Mrs: A. Norman (Resident Surgeon and Medical Superintendent) arrangement has made

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CL To the Senior Surgeon. Letter no 10325 dt 15/4/14

Requests him to obtain & forward Drs Dr Clements Normans report as Superintendent of Surgery &c when he was called on to submit his retirement

that he has no remarks to offer except that what is described therein is required by the Scheme for advancement and progress

SC 2 To the Senior Surgeon No. 1158 dt 9/1/76

Notes that the memorandum furnished by the Madras Member contains much interesting and useful information; directs that it should be printed and circulated to officers of the medical & Sanitary departments and the Presidents of the Bangalore and Mysore city municipal Councils; also calls for proposals from the Senior Surgeon as to how to carry

G.R.S 11] 1913-4

GENERAL AND REVENUE SECRETARIAT.

(Genl)

NOTES.

File No. 186-13

FILE HEADING.

Report of Mr. B. Mahomed Usman Asst Surgeon on medical and Sanitary arrangements in Europe.

From

No.	Dated	Received

Diary No.	Enclos.	Spare Copies.	Serial No.

BRIEF ABSTRACT OF LETTER.

NOTES AND ORDERS.

To the Senior Surgeon. Letter no. 10325 of 15.4.14
Requests him to obtain & forward Mr Mahomed Usmans report on Sanitation &c. in Europe, which he was called on to submit on his return from Europe.

6139 (2

G. R. S. 12]

General and Revenue Secretariat. | Med. File No. 186 of 1913-4

Serial No.	
	Letter No: Cf 446 of 20.4.14 from the Senior Surgeon.
2	Forwards the report called for in Sl. 1 and states that he has no remarks to offer except that what is described therein is the result of centuries of struggle for advancement and progress. Submitted.
	A memo will, if directed, be prepared embodying the observations and suggestions of Mr. Mahomed Usman in regard to medical and Sanitary arrangements in the State. Mr. Mahomed Usman has not dealt with the System of registration of Vital Statistics in Europe. 2 Please post up Short note.
No. A Short one.	Adm 5] 28.4.14 B.S. Adm 1/5.
3	Short. A Summary of Mr. Mahomed Usman's report is given in the note appended. Refee is also given therein to the paragraphs of the report. Adm 5] 15.5.14
4	B.S. The note of Mr Usman is interesting reading, but there are not many ~~points~~ suggestions for practical action therein 5 A short summary of this note

GPB—60,000—7-11-13

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is put up by the Caseworker for facility of reference.

1 Medical System

page 5 of the Report

Mr Nowrojee suggests that where qualified and competent private practitioners are available & willing, they may be given an opportunity to ~~to~~ work in the State Hospitals.

This is a suggestion worthy of being acted upon, but it is feared that there are no really Capable or well ~~well~~ Qualified medical men in an State outside the Service.

IV Hospital Construction, management etc.

page 15 of the Report

(1) A point ~~which~~ is worth noting, and which is not attended to now, is that in an Infectious Diseases Hospital, each patient should be isolated in a single room, and bath soap, basin, towels etc should all be kept separate for each patient and immediately disinfected after use.

Page 16 of the Report

(2) The importance attached to Pathological work in the diagnosis of diseases is also noteworthy

8

III Improvement of Villages

pages 19 to 21 of the Report

There is nothing new given under this head. Extracts of it may however be sent to the Medical Imp: Committee

NOTE—Contn. sheet.

G P B—60,000—7-11-13

G. R. S. 12]

(4

General and Revenue Secretariat. | Red File No. 186 of 1913-14.

Serial No.

if deemed necessary

IV Sanitation

Re suggestion about the use of revolving iron brush for cleaning the street does not appear to be one admitting of ~~any~~ adoption.

page 2 para 23

page 25 of the report-

Re removal of dustbins, and the substitution of receptacles for household ~~refuse~~ rubbish & sweepings will be a welcome reform if it can be effected. It will necessitate the removal of rubbish from each house by the Conservancy Staff, and there will be no place for a receptacle in any house which has not got a Compound.

Re necessity ~~for~~ ~~indicating the number of public latrines & urinals~~ ~~is accepted~~ ~~by the Municipality~~ this will do well to ~~be taken~~ attend

V Poor Relief.

10

Mr Norman suggests the establishment of self supporting work houses for the able bodied ~~but indigent~~ poor.

page 32

Re other suggestions relating to public urinals & public baths, swimming baths in Colleges, control of public markets and inspection of food stuffs are not-

NOTE—Contn. sheet.

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Serial No.

not new, but increased attention is required in respect of each. Subd for orders.

Hm 11/6.

Lee 4/

11. A draft order may be proposed to the effect that the report contains much interesting & useful information & that the S.S. may submit detailed proposals to Govt for consideration & orders in regard to each subject-fit for ~~demi-official~~ or suitable for practical action

Draw 19/6

Bm

12. Draft &c. as Subd.

Bm-61 19.6.14

Hm 20/6.

Bm Lee 7)

13. A duly drafted revised may be Subd at once. The Case-writer Mr. have had the discretion to put in an early slip at least in view of the special features of the case.

Draw

WM

14. Clean draft - Subd

Bm-51 10.7.14

Bm

Lee)

Lee 10/7/14

6139 (6

G. R. S. 12]

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Serial No.	
	15. The draft rules may, if deemed suitable be approved.

Schandavia
member
Dewan

Dharmaraja Rao
10.7.14.

16 Approved

18.7.14

13

17 *Submitted to His Highness.*

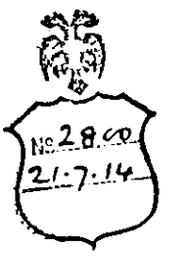
I submit for perusal a memorandum received from Mr. B.Mahomed Usman, Assistant Surgeon, giving an account of the Medical and Sanitary arrangements in Europe as observed by him during his deputation with His Highness the Yuvaraja.

Draft for approval

2. A draft of the order proposed to be issued in the matter, is also submitted.

M. Viswesvaraya -
21st July 1914 -

Record of Cases submitted for the Orders of His Highness the Maharaja.



Subject.

18 Draft order on the memorandum of Mr. B. Mahomed Usman, Assistant Surgeon, giving an account of the Medical and Sanitary arrangements in Europe.

69.

Order.

~~KRW~~
24/7/14

19 Secretary
26.7.14 RL

20

G. R. S. 12]

9

General and Revenue Secretariat. | Med File No. 186 of 1913-14

Serial No. 3

21

To The Senior Surgeon. G.O No: 1158 dy 29.7.14

Notes that the memorandum furnished by Mr. Mahomed Usman contains much interesting and useful information, directs that it should be printed and circulated to officers of the Med & Sany: Depts and the Presidents of the Bangalore and Mysore City Municipal Councils; also calls for proposals from the Senior Surgeon on such of the subjects as seem to him to require practical action.

A Short Summary of Mr. Mahamed Usman's report on medical and Sanitary arrangements in Europe: ——

The following points of interest mentioned in the report may be noted: ——

(1) There is no State medical Service on the Continent and in the United Kingdom as in India. Government give nothing for the maintenance of Hospitals. Except the Resident Med. officer who is prohibited from taking up private practice all Surgeons and Physicians are honorary workers. The Hospitals are meant only for the really poor and not for the rich & the poor alike. No one is admitted into a Hospital unless he produces from a recognised authority that he is too poor to obtain private med. aid. The cost of maintenance of poor patients is borne by the municipality or Borough to which they belong. The System of giving free med. aid at their houses to highly paid officials & officers does not exist anywhere.

Mr. Mahamed Usman suggests that qualified & Competent private practitioners, if willing, may be given an opportunity to be in charge of some of the wards in Hospital

(2) An account of the state Swiss Hospitals is given and their Construction, arrangements and equipment described

(3) In the labour wards of the British Hospital in Dublin Visitors are supplied with clean rubber boots to be worn before entering the wards. This is done with the double object (1) of preventing infection and (2) of preventing noise. Anyone entering the Hospital has to remove his coat in the Cloak Room and put on a Sterilized long coat.

(4) Though great skill is attained in Surgery the diagnosis of abdominal diseases is still defective

Sanitation.

(1) Severe penalties are imposed for breach of municipal law. The people heartily cooperate and submit to laws. For instance are of the bye-laws prohibits throwing bits of paper on the road and the other prohibits Spitting to prevent the Spread of Consumption no one thinks of doing these things unobserved in the hope of escaping detection.

(2) The following Subjects have been dealt with in the Report and the Suggestions for adoption in Mysore are noted against each:—

(a) Town Planning. Suitable Sites Should be Selected, near to one of the existing Villages that have Sprung up in a low valley. Each Site Should be Sufficiently large to enable the agriculturist to keep his cattle and Stock his Straw, not more than one-half Should be covered with building & the other half left open.

The cattle Shed Should be distinct from the dwelling portion.

All houses Should be separated by a distance of 5 to 6 feet at least.

Pure drinking water wells Should be Sunk in each Village at the cost of Govt, if need be.

one main Street & if the Village is big Some Side lanes with Storm water drains Should be Sufficient in all cases.

People Should be encouraged to build houses by giving Sites gratis and allowing free use of bamboo.

Model houses may be constructed and let out on nominal rent.

A certain percentage of local fund per annum of each Village Should be Set apart for being Spent on its improvement.

(b) Lighting —— no Suggestion

(c) Streets —— Streets are Swept with a revolving big iron brush drawn by a horse this may be adopted in the cities of Mysore & Bangalore.

(d) Drainage — The present System of open drains is not commendable as the Sewage gas makes the air impure and the flies Sitting on the filth Contaminate the purity of food exposed for Sale.

(e) Disposal of house and kitchen Sweepings } Each house holder may be made to provide himself with a receptable into which all kitchen and house rubbish may be thrown.

Public latrines & urinals. — The present practice of allowing Children to ease themselves in the Streets should be Strictly prohibited by punishing the parents

(9) Compounds & back-yards :— It is desirable to prevent by Strict rules, the growth of rank vegetation in the Compounds and back yards, to encourage growth of flowering plants and fruit trees by supplying seeds gratis, if need be, and holding occasional flower Shows in all Small places and awarding liberal money prizes especially to the poor.

In the capital cities of Bangalore & Mysore public baths should be maintained on modern lines in Suitable places. At least two of the colleges if not all High Schools ought to be provided with Swimming Baths to teach Swimming to every boy. A Small fee of one anna or so may be levied for the purpose

is very essential to provide water-Stands markets for washing Vegetables before they are exposed for Sale.

(g) Food-stuffs — Every Health officer should regularly inspect all food-stuffs exposed for sal and pay surprise visits t coffee & sweet meat-shop He should be provided with a Health Laboratory where anything suspicious can be examined. All breach of rules should be enforced by prosecutio The Health officer should empowered to bring coffee clubs and sweet meat shops into a Sanitary condition. He should be given a free hand.

Under each of the above heads the arrange-ments obtaining in Europe have been detailed at some length in Mr. Mahamed Usman's report. For details the report may be referred to.

Rev. 51
15.5.14

G. R. S. 26]

14/4

File No. /86-13

Serial No.

Diary No. of letter replied to 972 ~~4702~~

No. 10325

Med 186-13-1

General and Revenue Secretariat

( )

the *191* .

To

9/15 6.16.

The Senior Surgeon

Date of issue 15.4.16.

Signed by Mr A.V. Ramanathan

Sir,

It is understood that prior to Rao Bahadur Ramanu Pantulu going on deputation to Europe with His Highness the Yuvaraja, he was directed to visit some of the more important medical institutions both in England and on the Continent and also to study certain questions relating to Sanitation Vital Statistics etc and to submit a report in the matter on his return.

over.

SUBJECT.

No report having been received from Mr. Mahomed Usman till now in spite of two demi-official letters addressed to him, I am directed to request you to be so good as to obtain the report from him and forward it ~~for the information of Govt~~ with your remarks and suggestions at an early date.

2. The circumstances under which Mr. Mahomed Usman did not reply to the two D.O letters may also be kindly ascertained and intimated.

I have to

1. No: 7931 dt 17.2.14
2. No: 8512 dt 14.3.14

12/4

Adm 8/4 For Secy

Adm 5/1 -.4.14

List of enclosures,

Copied by

Examined by

GPB—25,000—4-3-13

No. G. 446
Encs. +6 Post Cards

Office of Senior Surgeon, Mysore Govt.,

Dated, Bangalore, 20 — 4 — 1914.

D 6139

From Rao Bahadur T.V.Arumugam Mudaliar, Esq., M.B.C.M.,
~~R. S. Achyuta Rao, Esquire,~~
Senior Surgeon with the Government of
H. H. the Maharaja of Mysore, Bangalore.

To

K. R. Srinivasa Iyengar, Esq., M.A.,
Secretary to the Government of
H. H. the Maharaja of Mysore, Genl. and Rev. Deptts.,
Bangalore.

Med 186-13-8-2

Sir,

With reference to your letter No.10325 dated 15th April 1914, I have the honor to forward the accompanying Memorandum sent for my perusal by Mr. Md. Usmon with his letter No. 291 dated 5th March 1914. As this office was not aware of the D.O. letters addressed to Mr. Usmon or that he had been directed to submit such a report to Government, it was retained here till now.

2. The Memorandum contains an interesting account of what Mr. Usmon was able to see during the European tour of H.H. the Yuvaraja and I have no remarks to offer, except that what is described in the Memo is the result of centuries of struggle for advancement and progress.

3. Mr. Usmon has been called upon to explain the circumstances under which he did not reply to the D.O. letters addressed to him by Government, and his explanation will be submitted as soon as it is received.

I have the honor to be,
Sir,
Your most obedient servant,

T.V. Arumugam

Senior Surgeon, Mysore Government.

fg

From

THE SENIOR SURGEON
WITH THE GOVT. OF MYSORE,
Bangalore.

To

THE SECRETARY
TO THE GOVT. OF MYSORE,
G. & R. DEPTTS., BANGALORE.

Dated 20-4-14

Despatched

Received

General No. G.446
No.

Enclosure No. 7.

SUBJECT.

Forwarding the Memorandum Containing an interesting account of what Dr. Mahomed Usman was able to see during the European Tour of His Highness the Yuvaraja.

Enclosed 186-13-2 4

M E M O R A N D U M.

During the recent European tour of High Highness the Yuvaraja of Mysore I had the high honour of accompanying His Highness as a member of his staff. We left Banglore on the 19th of March 13 and boarded the steamer "Mantua" at Bombay on the 22nd of March 13. The voyage to Europe was pleasant and uneventful except for a choppy sea near the Gulf of Lyons which confined us to our cabins for a day. We landed at Marsaillee on the 4th of April 13 and from there we travelled in the French Reveira, Italy, Switzerland and passed on to Paris. After a short stay there we reached London on the 22nd of May 13 where we stayed for three months. We visited the chief cities of England, Scotland and Ireland and after a sojourn of six months in Europe we returned to Mysore on the 6th of October 1913. Throughout the period His Highness and his staff kept well and have also returned with improved health, increased energy and vigour. We visited some important cities and villages, and saw

places noted for natural scenery and great factories equipped with machinery fitted with the latest scientific improvements. Everywhere we met with warm receptions and I had also the high privilege of being presented to His Majesty the King at the Levee.

General observations. No visitor in Europe can fail to be impressed with its high state of civilization and material prosperity and the more I saw of it, the more I regretted our own backwardness in every thing that conduces to human comfort and happiness. The business habits, the intense activity and the spirit of enterprise of the people in Europe are simply marvellous and present a striking contrast to our lethargic habits and want of enterprise. Whether in the theatre, the public place or places of business it was a noticeable feature that the people subjected themselves to order and discipline. Though the prosperity of Europe is due chiefly to its cool and invigorating climate, not a little is due to its beneficient laws, its system of education and to the ambition and spirit of enterprise

6

of its people, and during my travels the idea forced itself on my mind that our people can achieve a great deal by a little activity, co-operation and self reliance. I do not propose to discuss here this aspect of their life but shall deal only with their system of medical relief and sanitation.

Medical System. There is no State Medical Service on the Continent and in the United Kingdom as in India. The richer members of society look after the welfare of the poorer members, for, all Hospitals are maintained by voluntary contributions of money by private benefactors. Government gives nothing for the maintenance of the Hospitals. Except the Resident Medical Officer, who is prohibited from taking up private practice, all Surgeons and Physicians are honorary workers. Each of these takes up three or four wards in different Hospitals and by his industry gains a reputation and gradually builds up private practice, the extent of which depends on his ability and capacity. Even after they build up extensive private practice,

they

they continue their honorary work in the wards and ultimately become "Deans" of one of the big Hospitals. It shows their high public spirit and I doubt if the paid men in India show as much industry and enthusiasm for work as these unpaid medical men. This system besides relieving the tax-payer of the burden of maintaining a paid service compels a man to earn a living by his own industry and teaches himself reliance. Such a system is made possible by certain conditions obtaining there. The public spirit of the poeple is so high, that every rich man thinks it his duty to relieve the poorer members of his community. The Hospitals are meant only for the really poor and not d) indiscriminately, as in India, for the rich and the poor alike. There is no such complaint there, as one often hears in India, that the rich and the influential receive more prompt attendance and traetment than the really deserving poor. No one is admitted into a Hospital until he produces a certificate from a recognised authority that he is too poor to get private medical aid. In whichever Hospital a patient may be

treated

t reated, the cost of maintenance is borne by the Municip ality or the Borough to which the patient belongs. Our p resent practice of giving free medical aid to the rich a nd poor alike d oes not appear to be sound in principle, a s it is demoralising in its nature and kills private e nterprise. By the State-aided Service coming into c ompetition, a professional man cannot thrive by private p ractice alone and consequently there is a scramble for G overnment employment. By restricting admissions to

(e) t he Hospitals only to the poor, private practice will be s timulated and the congestion in the Government service r elieved. The system of giving free medical attendance a t their houses to highly paid officials and officers who c an well afford to pay for it does not exist anywhere. So l ong as the medical man in India has to compete with the G overnment on the one hand and the native quacks on the o ther, the system of private practice cannot thrive. In t his connection I would suggest that when qualified and c ompetent private practitioners are available and willing

(f) t hey may be given an opportunity to be in charge of some o f the wards for which they have special aptitude.

Hospitals.

Hospitals. I visited and worked in some of the well-known Hospitals in Paris, Lucerne, Rome, London and Dublin. Every Hospital is kept scrupulously clean and the wards in most of the Hospitals give the impression of a drawing room to a casual observer. Of all these Hospital buildings, I was very much impressed with the Swiss Hospital Buildings.

Swiss Hospitals.

Lucerne. They are built on the block system which is generally observed on the Continent. The Hospital at Lucerne is built on a small hillock outside the town but within easy reach of it in healthy surroundings so as to admit of as much free and pure air as possible and commanding a beatiful view of the lake and snow peaked mountains. I have annexed to this memo picture post cards of this Hospital to give an idea of what it is like. Some of our Hospitals are also built om the same principle but unfortunately the principle is sometimes violated by allowing houses to spring up in their vicinity and in not keeping the surroundings clean.

The

10

The Lucenee Hospital has an extensive compound and consists of the following 8 blocks. 1. The Administrative, 2. Medical, 3. Surgical, 4. Optholmic, 5. Infectious diseases, 6. Kitchen, 7. Laundry, 8. Church. These blocks are separated from each other by beautifully laid out gardens extending over 200feet.

Each block has 2 or 3 stories and stands by itself. The surgical ward has three operation theatres, one for aseptic cases, a second for doubtful cases and a third for septic cases unlike one theatre for all kinds of cases in our Hospitals. Adjoining each operation room are two well fitted rooms, one for washing and cleaning patients and the other for anasthesia. Chloroform is never used. Ether is used instead. In the English Hospitals Ether and Chloroform are used. Next to the operation theatre is the sterilization room where instruments and dressings are sterilized by steam. No sponges except strips of gauze are used. There was nothing particularly noticeable in the instruments except a double forceps used in cases of Gastro-Jejunotomy. The operation table is an ordinary one with arrangements to keep it warm with hot water on ac-

count

account of cold climate. One of the fittings in the operation theatre is an apparatus for " Physiological Solution sterilized hot and cold water for washing hands. Next to the steri lization room is a small dispensary containing medicines necessary for the operation theatre.

W a r d s. Each ward consists of a central ward and private rooms. Each patient has a chair, a cupboard with glass top, a soft and comfortable bed with a couple of woolen blankets and a quilt. The beds are arranged on three sides of the room; on the 4th side all doors open, to the main entrance to the lavatory, bath room and dining room. Between these doors there are almirahs containing the necessary equipment of the ward. The floor is made of Lindhuni. This is a preparation of cement and saw dust spread on a fair thick metting and glazed on the top. Every day it is brushed with wax. It is impermeable to water and can be cleaned with soap and water. It is spread on concrete flooring and is about ¼th of an inch in thickness. I saw many cases of fractures. Splints are hardly used and the method of treatment in vogue is by extension and

counter

counter extension. In cases of fractured leg, the injured part is wrapped in a calico sac and painted with mastick solution. The sac is brought round the ankle and stretched on to a piece of board to which is attached a weight and moves on a pulley. Beds or cots for treating cases of fracture are specially constructed to facilitate this method of treatment. Some cases of excision of knee joint for tubercular disease were seen by me as also cases of myxadema. I saw some cases operated by Professor Coheir for Goiter. In the female wards obstetric cases are also admitted. A case of ventral fixation for procedentia of the uterus was seen by me. There was slight modification in the technique and even in the Rotunda Hospital, Dublin, Doctor Jellet adopts the same procedure.

The Medical Wards. form a separate block and the arrangement is identical with the surgical wards except for the operation theatres.

Infectious Wards. The second floor is used for infectious diseases, the ground floor is converted into a Pathological Laboratory. I saw better arrange-

ments

arrangements made in the Paris Hospitals. There were cases of scarlet fever and dyptheria in the wards. The treatment adopted for the former was hot soap and bran baths, for the latter antb dyptherical serum.

Kitchen. The cleanliness of the kitchen is most striking. Every article of food is cooked by steam. There is a Refrigirating Chamber on a small scale.

Optholmic Wards. The general arrangement of the Optholmic Ward is on the same line as the other wards. The new thing I saw was a Nexist Lamp. This is an electric lamp adjustable to any angle and the light can be focused to any spot desired. All surgical instruments are sterilized except cataract knives. They are simply soaked in absolute alcohol for 15 minutes. For fomentation Re ano infusion of flosa cannopillac is used mixed with hot water. I was told it acts better than poultice.

Nursing Staff. Both on the Continent and the British Isles greater attention is paid to nursing than

than to drugging. English nurses are held in high estimation on the Continent. I saw in the Polyclinic Hospital in Rome English Nurses specially appointed to train the Italian Nurses. Nursing is considered to be a noble profession. Each ward has two nurses. Two or three wards have one Head Nurse. Each nurse turns out twice the quantity of work done by one of our nurses here. The Head Nurse is responsible for the cleanliness and care of patients. Friends and relations are allowed to see the patient once a week and that for a couple of hours. The Head Nurse has the discretion to admit or refuse isitors.

In the labour wards in the British Hospital in Dublin I noticed some interesting things. The nurse as soon as she sees any one coming to the ward keeps at the door a number of clean rubber boots to be worn before entering the wards. This is done with a double object - first to prevent infection being carried into the wards, and secondly to prevent the noise. Any one entering the Hospital has to remove his coat in the Cloak Room and put on a sterilized long coat. In the labour wards

antiseptic

antiseptic precautions are carried on to perfection. A number of basins for frequent washing of hands are fixed and in frant of each of these is placed a sand hour glass in a bracket. The object of this is to give an idea how long the nurses are to soak their hands in antiseptic lotion before handling the patients. In this ward there are no screens but there are a number of curtains moving on stretched wire by means of which the patients aan be isolated from each other. This is seen on a miniature scale in the Mysore Maternity Hospital. Professor Jellet the "Dean" or "Master" of this institution is a well known Gynocologist both in the British Isles and Continent. I met in the Hospital some medical men that had come from Australia to witness his operation. I had the good fortune of seeing him operate for Myomata Procedentia appendictis etc.

During our stay in Rome I was attending the Polyclinic Hospital and saw a famous Italian Surgeon operating. He performed five abdominal sections in one sitting. They were, two for Myomata of the Uterus one Ovarian cyst and two for appendicitis. In one case he opened the abdomen for ulcer of the Deuodenum but it

16

i t turned out to be a case of appendictis. In another c ase the left Ureter was divided. He applied end to end suture and made a pouch in the peritinium a s a guard against leakage and drained it. This shows that though great skill is attained in surgery the diagnosis of a bdominal diseases is still defective. I visited also the great Military Hospital in Rome which is also built l ike the Polyclinic Hospital on the block system. In both t hese Hospitals in addition to the Lavatory and bath room there is a common dining room where patients in a convalescent state dine.

14 While at Paris I witnessed several operations i n different Hospitals for Ovarian Cysts and tumours, a ppendictis lascerated perinium, procedentia e tc and a ll the cases were very dexterously handled.

15 Thermal Establishment in Monte Carto. In Monte Carto I visited the new Thermal Establishment. Though the difficulty of the language here as also on the Continent was great I went through the whole establishm ent which consists of massage room, bath rooms, carbonic b aths, hot air treatment, hydro-electric baths, rooms

f or

17

for X ray treatment apparatus for inhalations, vapour baths, steam baths and turkish baths and medico mechanical institute. This is a room of interest as it consists of machinery which is worked by electricity which can be applied to every part in the body. Massage for ankylosus can be easily applied ~~●●~~ also electric vibrations for rhumatism, lumbago etc. The whole institute is supervised by two Medical Officers who prescribe the different kinds of treatment according to the nature of the disease.

16 In Paris I visited the skin diseases hospital but was not impressed with its upkeep and cleanliness. The most interesting place in the Hospital was the Museum where wax models of all skin diseases are kept. The models were so perfect that a casual visitor would mistake them for actual human bodies with the diseases on them. I visited also the Pasteur Institute and saw the treatment adopted. I regret I could not see the method of the preparation of the serum as the Medical Officer promised to show me but failed to do so. In one portion of the compound of the Pasteur Institute

there

18

there is an Infectious Diseases Hospital. As I was with His Highness I did not go into the wards but from outside I was able to see through the big glass doors that each patient was isolated in a single room. Bath soap, basin towels etc. are all separate for each patient and are immediately disinfected after use. The arrangements were very satisfactory and impressive.

17 I next visited the Hospital attached to St Joseph. It is one of the well equipped hospitals in Paris. It is kept very clean. It is built on the block system and is scrupulously clean. The different blocks are connected ~~with~~ by covered passage. The wards give one the impression of a drawing room. The operation room is based on very scientific principles. In this hospital the dressings, instruments etc. required for each case are sterilized separately and the sterilization room is very well ~~equipped~~ equipped.

18 On the whole except the skin disease hospital in Paris I found that every hospital was kept scrupulously clean and supplied with all the latest scientific instruments etc. On the continent the hospitals are

19

built on the block system and in some places the different blocks are connected together by covered corridors, while in England and some Hospitals in Paris they are all huge buildings and the block system does not generally prevail. To every Hospital is attached a pathological laboratory and no diagnosis is complete without the examination of the discharges from tumours etc. In the operation theatre no operation is considered to be scientifically done unless the operator and those that help him inclusive of the Nurses wear sterilized gloves. All these people cover their heads with sterilized Bandages, also the mouth and nostrils are covered by another sterilized cloth.

19 I visited also an Instrument Maker's factory both in Paris and in London. In Paris I visited also a factory which specialises only in manufacturing sterilizing apparatus. (A catalogue of this firm I have appended for perusal.)

20 Sanitation. Nothing that wealth can command, human ingenuity devise, or labour achieve, has been spared to minister to the physical comfort and to the

healthy

h ealthy growth of the people. Every thing looks wonder-
f ully clean and every precaution has been taken against
t he spread of infectious or contagious disease. In all
p laces I saw pure drinking water is secured, the sur-
r oundings of towns and villages are kept clean, all excreta
i s efficiently drained off, and the purity of all articles
o f consumption is ensured, by rigid rules against deli-
terious adulteration. Money is forthcoming freely and
i s being spent lavishly to secure cleanliness and comfort.
As far as possible everything is placed on a commercial
b asis. Severe penalties are imposed for breach of
Municipal Law. The rules are not only promulgated but
a re also enforced. The people heartily co-operate and
w illingly submit to laws. Unless people realise the
b eneficient intentions of the laws and willingly co-operate,
t he best laws are of little avail. For instance one of
t he bye laws prohibits throwing bits of paper on the road, and the
o ther prohibits spitting, to prevent the spread of con-
s umption. These notices are enough to make people obey
t hem. No one thinks of doing these things unobserved
i n the hope of escaping detection. It is not merely
t he strict enforcement of the rules but also the willing

~~Co-operations~~ co-operation

co-operation of the people that is necessary to attain high sanitary efficiency. It is not possible to adopt all sanitary measures of Europe in the Mysore State. The customs, manners and habits of the people and the climatic conditions differ greatly. In describing the various sanitary measures adopted in Europe I shall state my views regarding the adoption of such of them as seem to me to be suitable to our country.

21 Town Planning. Towns and villages are planned with a view to sanitary requirements and artistic appearance. They are not allowed to grow haphazard as in India. All towns and villages are built on the slopes of Hillocks or raised grounds and the fall in the ground is taken advantage of to secure efficient drainage. All houses generally, whereever possible, face the sea, a river, a lake or other natural scenery, unlike India where the backyards generally face them. The watersides are converted into beautiful promenades and are not latrines, burial grounds or burning ghats as in India. All big towns have a number of open squares or circles in the centre of which there is a statue, a fountain or a monument. These circles or squares are fairly big and act

a s small lungs to the town besides adding to its beauty. From the margin of these squares or circles radiate dif- f erent main streets which are connected with other squares o r circles. There are cross streets cutting the main s treets at different distances. There are no conservancy l anes.

Villages are also built on the slopes of Hillocks with due regard to efficient drainage. They consist of m ain street with rows of houses on either side and some- t imes with side lanes. All houses are generally 2 or 3 s tories high even in villages and the ground floor is used to store grains etc. All houses are built o f brick or s tone and I did not see a single thatched house. Over- c rowding is strictly prohibited.

In this connection I beg to offer a few sug- g estions for the improvement of our villages. Suitable s ites with a gentle slope should be selected near, to one o f the existing villages, that have sprung up in a low v alley. Each site should be sufficiently large to enable t he agriculturist to keep his cattle, and to stock his s traw. Not more than one half of the site should be covere d

2)

covered with building and the other half should be kept open. The cattle shed should be kept separately from the dwelling house and no one should be allowed to keep his cattle in the dwelling portion and severe penalty should be imposed for the infringment of the rule. All houses should be separated by a distance of at least 5 to 6 feet to admit of free air and light and in cases of fire accidents to arrest its spreading. Wells should be sunk in each village at the cost of Government if need be and their surroundings should be kept clean to secure pure drinking water. One main street and if the village is big, some side lanes, with storm water drains would be sufficient in all cases. The streets and drains should be kept in repair every year regularly. People should be encouraged to build houses by giving sites gratis and allowing the free use of bamboo. The agriculturist will provide his own labour and the roof may be covered with tiles or thatch, according to his means. I would suggest also the desirability of building model houses as is now being done in Ireland where the conditions are very similar to ours, and letting them out on a nominal rent. In Rome and other malarial tracts in

Italy

Italy I noticed that all the surroundings of towns a nd villages are converted into lawns and all swampy places thoroughly drained and Euclyptus tree planted, as a preventative. Euculyptus planting was considered to be anti-malarial when malaria was considered to be due to Miasma and this theory held good before Ross's theory. I regret I was not able to meet Professor Dr. Grassi who did such humane work in Italy to eradicate malaria though I wrote to him for an interview. At present no part of our Local Funds Revenue is directly spent in most of our small villages, but is spent in bigger places at their expense. I would suggest that a certain percentage of the Local Fund Revenue of each village be set apart for being spent on its improvement. I think by these methods considerable sanitary progress can be made in villages year by year.

24 Lighting. In Europe all towns and big villages are lit up either with electricity or gas. Every water-fall, however small, is harnessed and the electricity generated is used for lighting and commercial purposes.

25 Streets. The main streets are all very

very broad and generally straight to admit of free passage for carriages and trams. On either side are paved side walks for foot passengers, and are generally half a foot higher than the main street. On the side of these side walks there are on the Continent (especially in France) invariably a single or double row of Avenue trees. In Paris these Avenue trees are kept trimmed. The majority of the streets are paved with blocks of wood or stone. In very few places there are metalled roads. The metal is steeped in tar before it is spread. Instead of gravel and sand finely powdered metal steeped in tar is spread and rolled. After it is well consolidated a coating of tar is given. This method prevents dust, keeps the street clean and shiny and can be flushed at nights. Except the dropping of animals one does not see any dirt on the streets. During nights the streets are flushed well and cleaned so as not to interfere with traffic during the day. Streets are swept with a revolving big iron brush drawn by a horse. This is not only economical but is more efficient than hand sweeping, saves time and a great deal of work is turned out in a short time

t ime. I think this may with advantage be used in our c apital cities of Mysore and Bangalore, as manual labour w ould be saved.

Suggestion III

26 Drainage. Every house is fitted with f lushing apparatus and every place including big villages h as its own under-ground drainage. I saw in Rome the old u nder-ground drainage built by the Romans a thousand y ears ago to carry the sewage from the palace into the r iver Tiber. Both on the Continent and in the United Kingdom there are no open drains as in India. The s treets have a gentle slope on either side (Barrel shaped) with no open storm water drains and the storm water f lows through iron gratings or semi-circular openings f itted at regular intervals on the sides of the side walks i nto the under ground drains. In Glasgow I visited the s ewage works. I saw the whole process of sewage purification b y chemical precipitation with lime and peroxide of iron. The resulting slake was sold as manure. A copy of the l iterature pertaining to chemical precipitation of sewage I have enclosed for kind perusal. Our present system of open drains does not commend itself to me as the

III Underground Drainage

sewage gas makes the air impure and the flies sitting on the filth contaminate the purity of food exposed for sale.

27 Disposal of house and kitchen sweepings. There are no dust bins on the streets to disfigure their beauty or to serve as breeding ground for microbes or for the collection of stray dogs and donkeys to scramble for the kitchen leavings. Each house holder is forced to provide himself with a receptacle, into which all kitchen and house rubbish is thrown. These are kept outside the door at fixed hours in the mornings, when the rubbish cart passing regularly empties its contents. No waste papers are allowed to be thrown in the street. Every man has to put them into a waste paper basket attached to lamp posts in main streets and public places. Spitting in the streets as stated elsewhere is prohibited to prevent the spread of consumption. Heroic efforts are being made to combat this infectious disease. In Dublin a Sanitorium is built for consumptives, and Toulon in France is considered to be the best place for persons suffering from lung diseases on account of its comparitively warm

climate

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climate as it gets the largest amount of sunshine during the year and its beautiful pine forests.

28 The removal of dust bin and the substitution of receptacles for house-hold rubbish and sweepings seem to me very essential. Dogs and donkeys in their fight for the kitchen leavings often upset the dustbins which cause the leaves to fly about and the dust to spread out on the streets. Nothing need be said about the noise caused by them.

29 Public latrines and urinals. Every street has one or more public latrines and urinals unlike India where the entire streets and open drains are used as such, by children and even grown up persons. The water closet is on one side and the urinal on the other. Both are kept scrupulously clean. Glazed tiles are used for flooring. In the Urinals there is a constant flow of water to keep them perfectly clean and in addition a few naphtheline balls are thrown as a deoderant. Nothing is charged for the use of the urinals. For the use of the latrine a penny is to be dropped in a slot in the door which as soon as it is done automatically opens

and

and shows a sign board "Engaged". In England latrines are all under ground but on the Continent they are above ground

30 It is essetial to have a number of these public latrines and urinals in all fairly big places in the state and they should be kept scrupulously clean. The present practice of allowing children to ease themselves in the streets should be strictly prohibited by punishing the parents.

31 Compounds and back-yards. In every place in Europe every man keeps his premises and compound very clean. The cleanliness of each house adds to the cleanliness of the whole town and to the health of the place. No rank vegitation is allowed to grow in any compound or back-yard. Every compound is beautifully laid out with flower beds and ornamental and fruit trees. Poor persons who have no compound or back-yard are encouraged to grow flowers in earthen or wooden boxes which are fitted in the window sills or any little open space in the house. These are supplied to them gratis. Those that have a small compound convert it partly into a kitchen garden

and

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and partly into a flower garden. Some of the finest flowers grown by the poor persons ~~xxxx~~ were shown to His Highness the Yuvaraja and the staff during their visits into the slums of London in "The Home for Women", Doctor Bernardoe's Home, Midland Home, and many other places. This system besides creating a taste for the cultivation of flowers, necessarily promotes a desire for cleanliness. Small as this may appear at first sight, the general effect of it would be great and I would suggest the desirability by strict rules to prevent the growth of rank vegitation in the compounds and back-yards and the encouragement of the growth of flowering plants and fruit trees by supplying seeds gratis if need be, and holding occasional flower shows in all small places and awarding liberal money prizes especially to the poor.

32 Public Baths. In all large towns in Europe there are public baths which include swimming baths, hot and cold baths and airing rooms. No one even with the appearance of any skin disease or sore is allowed inside these baths. A small fee is levied to make the institution self supporting.

Our

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33 Our capital cities of Bangalore and Mysore with their abundant water supply ought to be able to maintain these baths on modern lines in some suitable places. Rooms may also be provided for washing clothing as this would effectually prevent poor persons washing themselves and their dirty clothes near all the taps or any puddle. At least two of our Colleges if not all High Schools ought to be provided with swimming baths to teach every boy swimming in his younger days. A small fee of one anna or so, for public baths would make it self supporting. Literature on the subject is also enclosed for perusal.

34 M a r k e t s. All markets in Europe are open at stated hours. All stalls are paved with stone and the whole place is kept thoroughly clean and flushed daily. Particular care is paid to the vegetables exposed for sale. Invariably an officer who realises his responsibility and is very strict is placed in charge of markets.

35 It is not difficult to improve our markets. It is very essetial to provide water stands in our markets

for

for washing vegetables before they are exposed for sale. as our vegetable sellers invariably wash them in any dirt puddle they come across. The evil of many a water borne disease can be minimised by this. The meat market in Europe is also paved with stone or marble, generally the latter, and it is a pleasure to see the stalls as great care and attention is paid to keep the place very clean. Sweets in sweet sellor's shop cannot be exposed for sale unless kept in glass show cases. All these precautions are taken to prevent dust and contamination from flies. Nowhere on the Continent or the British Isles except in Ireland did I see any flies, as flies indicate filth and defective sanitary measures.

Food Stuff. Adulteration of food stuff is a crime in Europe and is punishable under law. It is no wonder that one gets such pure and fresh stuff as the bye laws are very stringent against adulteration. There are special food inspectors appointed to attend to this work and there is the Health Officer to check their work. In our part of India the adulteration of ghee, flour, sugar, oil, and milk is carried on to a

great

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g reat extent and it is high time that stringent bye laws a re framed and strictly enforced. Every Health Officer s hould regularly inspect all food stuffs exposed for sale a nd pay surprise visits to coffee and sweet-meat shops w hich are not only dirty but a source of positive danger t o the innocent public and test the articles used. He s hould be provided with a Health Laboratory where any t hing suspicious can be examined. All b reaches of the r ules should be enforced by prosecutions to act as a d eterrent to others. He should also be empowered to b ring the coffee clubs and sweet-meat shops into a sanitar; c ondition. If I rember right the late Sanitary Commis- s ioner Col. J. Smithe pointed out to the Government in one o f his able reports that the Health Officer should be made a s independent as a priest and unless he is given a free h and i t is no good appointing a Health Officer.

37 In Europe it is easy to get a supply of the p urest milk. The cleanliness observed is so great that a ll cattle sheds are built on hygenic principles and cattle a re looked after, as inmates of the house. They are fed o n good grass, fodder foods, turnips etc. and are not allowe ·e d to eat any thing that comes in their way as in India.

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It is a common sight to see herds of stray cattle in publi
s treets both during the day and night as the owners turn
t hem out after milking to find for themselves some fodder
s omewhere. Even milking in some places is not done by
h and. By a special appliance worked by electricity cows
a re milked. Two of these His Highness has brought with
h im and their cost is not prohibitive.

38 From what little I have been able to describe
a bove it will be seen what a high state of sanitary effi-
c iency obtains in Europe. Purity of all articles of con-
s umption and cleanliness of the surroundings are secured
b y every means which money and skill can command. Every
p lace can afford medical relief. By a combination of
t hese methods the death rate which formerly stood high
h as been reduced. Most of the things done in Europe
a re also possible here. By a gradual adoption of these
m ethods we should be able to reduce our rate of mortality
a nd minimise the annual visits of Plague, Cholera, Small-
p ox and other infectious diseases. Begging as a profession
i s unknown in Europe and none would encourage it by giving
a lms and doles of food. Till we are able to establish the
p oor law system of Europe in its entrity it should? I think,

h e

b e possible to establish self supporting work houses w here any healthy person seen begging should at once be t aken. This would discourage laziness and prevent the b eggar nuisance.

39 Besides witnessing many major operations very d exterously performed in Rome, Paris, Lucerne, Dublin a nd in London Hospitals I took a Post Graduate Course i n West London Hospital along with the Army and Navy m en. According to our original programme our stay in London w as to be a month and a half. I first took a Post G raduate Course for a month. A copy of the certificate g ranted by the Dean of the Hospital is subjoined to this m emo and is reproduced here for ready reference.

West London Hospital,
Hammer Smith Road,
London, 10th September 1913.

I hereby certify that Dr, Usmon of India h as attended the Medical and Surgical practice o f the West London Hospital for one month from 26th May 1913 to 25th June 1913 both days inclusive.

I also certify that he attended the Patho-

56

Pathological Laboratory for one month working under the supervision of the Pathologist who cannot speak in too high terms of the quickness in mastering technique and his assiduity in attacking problems often set before him.

His zeal and energy were most marked throughout the time he spent in the Laboratory.

He attended regularly and worked to the entire satisfaction of the Honorary visiting staff.

Sd/ Donal Armour,
M.B. F.R.C.S.,
Dean.

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As our stay was prolonged to three months I subsequently took a special course in throat, ear and nose diseases, Sirum Therapy and Laboratory work such as Wassermans reaction, examination of the contents of stomach, Cerebrospinal fluid, sputum etc. analysis of urine, hacmotology bacteriology etc. I attended the following lectures, practical and theorical, Neuro-lectures on diseases of the rectum and heart diseases,

Neurological

Neurological lectures, lectures on fractures, skin diseases, Gynocological lectures etc. I attended also the radiography and electric treatment department and the clinical lectures. In addition I was attending the following Hospitals :- Cancer Hospital, Rectal disease Hospital, St. Peter's Hospital for cystescope and urethuscope, Sphygmoidoscope examination, also where operation for ~~enl~~ enlarged Prostrate was performed by Mr. Fry, London free Hospital where operations for Goitre was a speciality. This is considered the second best Hospital for Goitre as the foremost Surgeon Professor Coheir operates in Switzerland where I had the good fortune of seeing some cases operated by him also cases of Myxadema. I visited the Hospital for heart diseases:- London Hospital, Charring Cross Hospital. All the Professors were very kind to me. I was able to acquire a great deal of information, learning much and unlearning a little. As this is not a discourse on high ~~t~~h technical subjects I have omitted various matters of purely professional and scientific interest. I trust that this memorandum will show that my trips to Europe has not been a mere round of pleasure, but that I have

out

put in sternuous work to improve, and bring up to date, my professional attainments. I have travelled in Europe with open and observant eyes and I have learnt many useful lessons, and have pondered over the same. If I have learnt nothing else I have at least learnt to admire the European cleanliness, business methods, enthusiasm for work and sense of duty.

(x) In conclusion I may be permitted to give expression to the deep sense of gratitude I entertain to His Highness the Yuvaraja for all his most gracious kindness to me and for the facility given to me to prosecute my studies, and I attribute all that I have learnt and achieved to His Highness' wise guidance, zealous enthusiasm and kindly encouragement.

G.R.S. 28]

Passing orders on Mr Mahamed Usman report on med & Sanry: arrangements in Europe.

39

File No. 186-73

Serial No. 3

Diary No. of letter replied to 6139

Proceedings of the Government of His Highness the Maharaja of Mysore

GENERAL AND REVENUE SECRETARIAT.

(med)

the 191

Date of issue 29.7.14

Signed by Mr N Mallikarjunaiah

READ— Rep. Memo with 5 Photos

Letter No: G 446 of 11 April'14 from the Senior Surgeon forwarding a memorandum received from Mr B. Mahamed Usman

~~ORDER THEREON. No.~~

Asst Surgeon, giving a short Count of the medical and Sanitary arrangements in Europe as observed by him during his deputation on duty with H.H. the Yuvaraj

SUBJECT.

Order thereon:— 1158 Med 186-13—43 29.7.14

Government are pleased to note that the memorandum furnished by Mr. Mahomed Usman contains much interesting and useful information. The memorandum should be printed & circulated to officers of the Medical & Sanitary Departments & the Presidents of the Bengalee & Bazar Municipal Councils.

2. The Senior Surgeon may submit for the orders of Government detailed proposals in regard to such of the subjects therein dealt with as seem to him to require practical action.

Dtd 30/7/14 Secretary

18.7.14

21.7.14.

To the Senior Surgeon returning the memorandum.